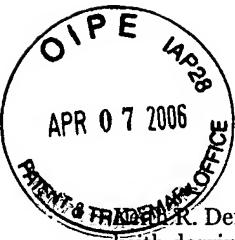


*ZJW*

**SIMMONS & DERRINGTON, L.L.P.**



A LIMITED LIABILITY PARTNERSHIP  
FROST BANK BUILDING  
6750 W. LOOP SOUTH, SUITE 920  
HOUSTON, TEXAS 77401  
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*DAC/SP*

Keith R. Derrington  
[keith.derrington@sdiplaw.com](mailto:keith.derrington@sdiplaw.com)

102.55

March 21, 2006

In re Application of:  
**Rolon et al.**

§ Group Art Unit: **2851**

§

§

§

Patent No.: **6,961,118 B2**

§ Examiner: **Delia Rutledge**

§

Issue Date: **November 1, 2005**

§

§

Title: **CONTINUOUS PAPER FEED  
SYSTEM**

§ Docket No.: **584-30865 US (102.55)**

§

**Via First Class Mail**

**Mail Stop Petitions**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

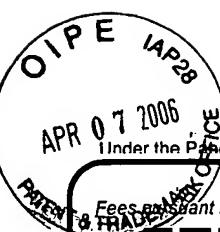
Transmitted herewith is a **Request to Correct the Assignee Under 37 CFR 3.81(b)** in the above-identified Application. Also enclosed are **copies of Recordation of Assignments, Fee Transmittal** and **postcard** for acknowledgment of the enclosed documents.

Should you have any questions or comments, please contact this office at the number indicated above. Thank you for your attention to this matter.

Very truly yours,

Keith R. Derrington

KRD:dmw  
Enclosures



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
**230.00**

### **Complete if Known**

|                      |                                |
|----------------------|--------------------------------|
| Application Number   | 10617,645/USPatent 6,961,118B2 |
| Filing Date          | November 1, 2005               |
| First Named Inventor | Rolon et al.                   |
| Examiner Name        | Delia Rutledge                 |
| Art Unit             | 2851                           |
| Attorney Docket No.  | 584-30865 US (102.55)          |

### **METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

|   |   |
|---|---|
| <input type="checkbox"/> Charge fee(s) indicated below  | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments                                  |

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### **FEE CALCULATION**

#### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u>Application Type</u> | <u>FILING FEES</u> |                              | <u>SEARCH FEES</u> |                              | <u>EXAMINATION FEES</u> |                              |                       |
|-------------------------|--------------------|------------------------------|--------------------|------------------------------|-------------------------|------------------------------|-----------------------|
|                         | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>    | <u>Small Entity Fee (\$)</u> | <u>Fee (\$)</u>         | <u>Small Entity Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility                 | 300                | 150                          | 500                | 250                          | 200                     | 100                          | _____                 |
| Design                  | 200                | 100                          | 100                | 50                           | 130                     | 65                           | _____                 |
| Plant                   | 200                | 100                          | 300                | 150                          | 160                     | 80                           | _____                 |
| Reissue                 | 300                | 150                          | 500                | 250                          | 600                     | 300                          | _____                 |
| Provisional             | 200                | 100                          | 0                  | 0                            | 0                       | 0                            | _____                 |

#### **2. EXCESS CLAIM FEES**

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| <u>Total Claims</u>  | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Small Entity</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
|--|---------------------|-----------------|----------------------|---------------------|-----------------|-----------------|
| - 20 or HP =   | x                   | =               |                      |                     | 50              | 25              |
| HP = highest number of total claims paid for, if greater than 20.      |                     |                 |                      |                     | 200             | 100             |
| <u>Indep. Claims</u>   | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |                     | 360             | 180             |
| - 3 or HP =  | x                   | =               |                      |                     |                 |                 |
| HP = highest number of independent claims paid for, if greater than 3. |                     |                 |                      |                     |                 |                 |

#### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>Number of each additional 50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
|---------------------|---------------------|---|-----------------|----------------------|
| - 100 =             | / 50 =              | (round up to a whole number) x                          | =               |                      |

#### **4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Processing Fee 37 CFR 1.117(b) and Cert of Corr fee under 37 CFR 1.323      230.00

#### **SUBMITTED BY**

|                   |                     |   |                        |
|-------------------|---------------------|---|------------------------|
| Signature         |                     | Registration No.<br>(Attorney/Agent) 44,061 | Telephone 713-977-0723 |
| Name (Print/Type) | Keith R. Derrington | Date 3-21-06                                |                        |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:  
**Rolon et al.**

Serial No.: **10/617,645**

Filed: **July 11, 2003**

Title: **CONTINUOUS PAPER FEED  
SYSTEM**

Mail Stop Petitions  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

§ Group Art Unit: **2851**  
§  
§  
§  
§ Examiner: **Delia Rutledge**  
§  
§  
§ Docket No.: **584-30865 US (102.55)**  
§

I hereby certify that this paper or fee is being deposited with the United States Postal Service as First Class Mail under 37 C.F.R. 1.8 on the date indicated below in an envelope addressed to:

Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

*Dorothy Williams*  
Signature

*3-21-06*  
Date

**REQUEST TO CORRECT THE ASSIGNEE UNDER 37 CFR 3.81(b)**

Dear Sir:

This Request is in response to the communication from the Decisions & Certificate of Correction Branch dated March 15, 2006. Applicants hereby request this Request be considered in view of the following.

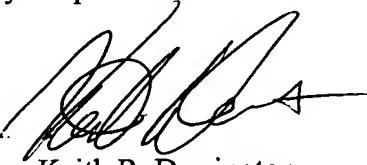
Failure to include the correct assignee name on the PTOL-85B mailed August 9, 2005 was inadvertent. Copies of two Recordation of Assignments dated March 4, 2004 are provided.

Applicants include a Fee Transmittal paying the processing fee set forth in 37 CFR 1.117(b) and the fee for consideration of a Request for Certificate of Correction under 37 CFR 1.323.

Applicants request that the file be forwarded to Certificates of Correction Branch for issuance of a Certificate of Correction, if the Request is granted.

Should the Examiner have any questions, comments or suggestions, the Examiner is invited to contact the Applicant's representative by telephone or fax.

Date: 3-21-06



Keith R. Derrington  
Reg. No. 44,061  
Keith R. Derrington, P.C.  
Sterling Bank Building, Suite 465  
10260 Westheimer  
Houston, Texas 77042  
Telephone: 713-977-0723  
Facsimile: 713-975-0995  
ATTORNEY FOR APPLICANTS

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Company: TIMOTHY DONOUGHUE  
Fax Number: 17139750995  
Voice Phone:

## Fax Notes:

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Pg# Description

- 1 Cover Page
- 2 282.TXT
- 4 Document 1, Batch 292187

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Date and time of transmission: Tuesday, March 09, 2004 12:55:12 PM  
Number of pages including this cover sheet: 04

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MARCH 09, 2004

PTAS

\*700070028A\*

BAKER ATLAS DIVISION OF BAKER, ET AL.  
TIMOTHY DONOUGHUE  
PO BOX 1407  
HOUSTON, TX 77251

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THE ENCLOSED DOCUMENT HAS BEEN RECORDED BY THE ASSIGNMENT DIVISION OF THE U.S. PATENT AND TRADEMARK OFFICE. A COMPLETE MICROFILM COPY IS AVAILABLE AT THE ASSIGNMENT SEARCH ROOM ON THE REEL AND FRAME NUMBER REFERENCED BELOW.

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RECORDATION DATE: 03/04/2004

REEL/FRAME: 014398/0406  
NUMBER OF PAGES: 4

BRIEF: ASSIGNMENT OF ASSIGNEE'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNEE:  
ANDRADE, HAROLD

DOC DATE: 03/03/2004

ASSIGNEE:  
SALYER, JOHN

DOC DATE: 03/03/2004

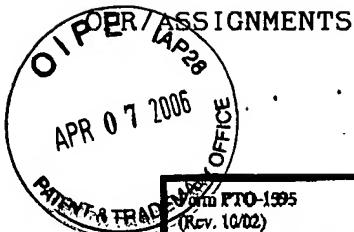
ASSIGNEE:  
BAKER HUGHES INCORPORATED  
3900 ESSEX LANE  
HOUSTON, TEXAS 77027

SERIAL NUMBER: 60446800  
PATENT NUMBER:

FILING DATE: 02/12/2003  
ISSUE DATE:

014398/0406 PAGE 2

THERESA FREDERICK, EXAMINER  
ASSIGNMENT DIVISION  
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3/9/04 12:56 PAGE 4/4 RightFAX

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| Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |  |
| 3. Nature of conveyance:<br><br><input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger<br><input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name<br><input type="checkbox"/> Other _____  | Street Address: 3900 Essex Lane<br><br>_____  | City: Houston State: Tx Zip: 77027<br><br>Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Execution Date: 3/3/2004   |   |  |
| 4. Application number(s) or patent number(s):<br><br>If this document is being filed together with a new application, the execution date of the application is: _____<br><br>A. Patent Application No.(s) 60/446,800   | B. Patent No.(s) _____<br><br>_____   |  |
| Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |  |
| 5. Name and address of party to whom correspondence concerning document should be mailed:<br><br>Name: Timothy Donoughue<br><br>Internal Address: Baker Atlas Division of Baker<br><br>Hughes Incorporated<br><br>_____<br><br>Street Address: P.O. Box 1407<br><br>_____<br><br>City: Houston State: Tx Zip: 77251  | 6. Total number of applications and patents involved: <input type="checkbox"/> 1<br><br>7. Total fee (37 CFR 3.41).....\$ 40.00<br><br><input type="checkbox"/> Enclosed<br><br><input checked="" type="checkbox"/> Authorized to be charged to deposit account | 8. Deposit account number:<br><br>02-0429<br><br>_____   |
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| 9. Signature.<br><br><br>Keith Derrington<br>Name of Person Signing<br>_____<br>Signature _____ Date 3/4/04<br>Total number of pages including cover sheet, attachments, and documents: <input type="checkbox"/> 4<br>Mail documents to be recorded with required cover sheet information to:<br>Commissioner of Patents & Trademarks, Box Assignments<br>Washington, D.C. 20231 |   |  |

GPO : 2004-290 : 020428

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Company: TIMOTHY DONOUGHUE  
Fax Number: 17139750995  
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## Fax Notes:

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Pg# Description

- 1 Cover Page
- 2 278.TXT
- 3 Document 1, Batch 292183

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MARCH 09, 2004

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RECORDATION DATE: 03/04/2004

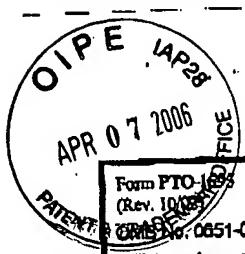
REEL/FRAME: 014398/0403  
NUMBER OF PAGES: 3

BRIEF: ASSIGNMENT OF ASSIGNEE'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:  
ROLON, ARNOLDO

DOC DATE: 03/03/2004

ASSIGNEE:  
ROLON ENGINEERING ASSOCIATES  
11831 MOORECREEK  
HOUSTON, TEXAS 77070SERIAL NUMBER: 60446800  
PATENT NUMBER:FILING DATE: 02/12/2003  
ISSUE DATE:LAZENA MARTIN, EXAMINER  
ASSIGNMENT DIVISION  
OFFICE OF PUBLIC RECORDS

03/04/2004  
700070026

Form PTO-1025  
(Rev. 10/03)  
GPO: No. 0651-0027 (exp. 6/30/2005)

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Arnoldo Roton

2. Name and address of receiving party(ies)

Name: Rolon Engineering Associates

Internal Address:

Additional name(s) of conveying party(ies) attached?  Yes  No

3. Nature of conveyance:

 Assignment Merger Security Agreement Change of Name Other \_\_\_\_\_

Execution Date: 3/3/2004

Street Address: 11831 Moorecreek

City: Houston State: Tx Zip: 77070

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: \_\_\_\_\_

A. Patent Application No.(s) 60/446,800

B. Patent No.(s) \_\_\_\_\_

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Timothy Donoughue

Internal Address: Baker Atlas Division of Baker

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Street Address: P.O. Box 1407

City: Houston State: Tx Zip: 77251

6. Total number of applications and patents involved:  1

7. Total fee (37 CFR 3.41),.....\$ 40.00

 Enclosed Authorized to be charged to deposit account

8. Deposit account number:

02-0429

9. Signature.

Keith Derrington

Name of Person Signing

Signature

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